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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account name : AKERMAN SENTERFITT & ELDSON (Janet

Account Number : 076656002425 Phone : (407)843-7860 Fax Number : (407)843-6610

FLORIDA LIMITED PARTNERSHIP

LIBERTY DR. PHILLIPS, LLLP

Certificate of Status	0
Certified Copy	1
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**€ Thomas** NOV - 7 2005

\* Statement of Qualification to follow.

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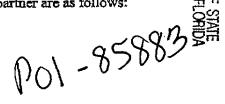
# CERTIFICATE OF LIMITED PARTNERSHIP OF LIBERTY DR. PROLLIPS, LLLP

This Certificate of Limited Partnership is prepared and recorded in accordance with the provisions of the Uniform Limited Partnership Act as contained in Chapter 620 of the Florida Statutes.

- 1. The name of this Partnership is: LIBERTY DR. PHILLIPS, LLLP.
- 2. The location of the principal place of business of the Partnership shall be at: 310 West Central Parkway, Suite 7000, Altamonte Springs, Florida, 32714, and the name and address of the agent for service of process is: Liberty Dr. Phillips, Inc., 310 West Central Parkway, Suite 7000, Altamonte Springs, Florida, 32714.
  - 3. The name and business address of the general partner are as follows:

#### General Partner

Liberty Dr. Phillips, Inc. 310 West Central Parkway, Suite 7000 Altamonte Springs, Florida 32714



- 4. A mailing address for the Partnership is 310 West Central Parkway, Suite 7000, Altamonte Springs, Florida, 32714.
- 5. The latest date upon which the Partnership is to dissolve is upon the occurrence of any of the following events:
  - (A) The voluntary agreement of the Partners to dissolve the Partnership;
  - (B) December 31, 2077;
  - (C) The withdrawal or deemed withdrawal of the last remaining General Partner of the Partnership (unless a substitute General Partner is designated);
  - (D) The sale of all or substantially all of the Partnership assets; or
  - (E) The occurrence of any other event causing the dissolution of a limited partnership under the laws of the State of Florida.

#### [SIGNATURE PAGE FOLLOWS]

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IN WITNESS WHEREOF, the undersigned have hereunto signed the foregoing Certificate of Limited Partnership this \_\_\_\_\_ day of October, 2005, and hereby affirm under the penalties of perjury that the facts stated therein are true and correct.

#### GENERAL PARTNER

LIBERTY DR. PHILLIPS, INC., a Florida corporation

By: W Michael Mikkelson President

REGISTERED AGENT

LIBERTY DR. PHILLIPS, INC.,

corporation

By: W Michael Mikkelson Presiden

{OR947700;1}

08:88PM - FROM-AKERMAN SENTERFITT 17-3

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FLORIDA LIMITED PARTNERSHIP

The undersigned being the sole general partner of LIBERTY DR. PHILLIPS, LLLP, a Florida limited liability limited partnership, certifies:

- 1. That the amount of the capital contributions to date of the limited partners is \$521,589.50.
- That the total amount contributed and anticipated to be contributed by the 2. limited partners totals \$521,589.50

Signed this 31 day of October, 2005.

#### FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury, the undersigned declares that he has read the foregoing and knows the contents thereof and that the facts stated herein are true and correct.

GENERAL PARTNER:

LIBERTY DR. PHILLIPS, INC.,

a Florida corporation

By: Mr. Miles

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